

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>in</i>		<i>12/25/00</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>10-31-00</i>
FORMALITY REVIEW	<i>CA</i>	<i>69914</i>	<i>11/29/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	<i>11/20/00</i>
2	✓	✓	<i>11/20/00</i>
3	✓	✓	<i>11/20/00</i>
4	✓	✓	<i>11/20/00</i>
5	✓	✓	<i>11/20/00</i>
6	✓	✓	<i>11/20/00</i>
7	✓	✓	<i>11/20/00</i>
8	✓	✓	<i>11/20/00</i>
9	✓	✓	<i>11/20/00</i>
10	✓	✓	<i>11/20/00</i>
11	✓	✓	<i>11/20/00</i>
12	✓	✓	<i>11/20/00</i>
13	✓	✓	<i>11/20/00</i>
14	✓	✓	<i>11/20/00</i>
15	✓	✓	<i>11/20/00</i>
16	✓	✓	<i>11/20/00</i>
17	✓	✓	<i>11/20/00</i>
18	✓	✓	<i>11/20/00</i>
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25	✓	✓	<i>11/20/00</i>
26	✓	✓	<i>11/20/00</i>
27	✓	✓	<i>11/20/00</i>
28	✓	✓	<i>11/20/00</i>
29	✓	✓	<i>11/20/00</i>
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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